

With the Author's kind regards

DON'TS.

A SHORT ADDRESS TO NURSES

ON THE

LITTLE NICETIES OF PRIVATE NURSING

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"The address is Hullent & should be in
the hands of my nurse or she is about
to turn a nurse." John Fred. Rivers

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A SHORT ADDRESS TO NURSES
ON THE
LITTLE NICETIES OF PRIVATE NURSING.

BY
Emily F. Stewart Brown,
*Lady President, 1902,
Hospital for Women, Liverpool.*

"Think naught a trifle, though it small appear;
Small sands the mountain, moments make the year,
And trifles life."—EDWARD YOUNG.

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“DON'TS.”

An Address to Nurses.

“Those graceful acts, those thousand decencies
That daily flow from all her words and actions.”

MILTON : *Paradise Lost*.

The great interest taken in nurses and nursing by Her Gracious Majesty, Queen Alexandra, has done much to raise the standard of nursing, to encourage those connected with it, and to improve the class of person presenting themselves for training. For this England is deeply grateful, and it is a convincing proof to the nation that Her Majesty graciously recognizes the profession of nurse as not only a useful, but as an honourable and noble one. For many years I have made a study of nurses and their work, first as an amusement, latterly in all seriousness, and I have had exceptional opportunities of seeing them both in hospital and in private nursing; from the ignorant old house servant of the sixties, who took up what she called “Nursing” as an agreeable and light occupation for her declining years; to the competent and often charming Sister who controls a hospital, and trains its nurses with ease and efficiency. Now that our Hospital and Nursing Institutions are under the superintendence of

ladies of good education and more than average intelligence, the wards afford an unrivalled training in all that pertains to medical and surgical attention ; but with all due deference to these ladies, we must acknowledge that it is absolutely impossible to give, in hospital, much attention to the little, troublesome, refinements and niceties which are required by the fads and fancies of private patients. My observations show much friction often exists between private patient and nurse. In most cases this could be minimized by attention to, and knowledge of, little details, which, outside the limited area of a sick-room, might be called "trumpery." Nevertheless, from little causes come great disasters, and what doctor has not been puzzled by forked lightning on his patient's temperature chart, which could not be accounted for by bodily condition ?

No nurse who studies her profession and values the comfort of her patients will lose in dignity, but rather gain in respect, by attention to what I venture to call the little refinements of private nursing.

To use a homely simile, the knowledge acquired at the Hospital is the useful, well-baked cake, my notes are but the icing on the top, which renders the excellent cake more pleasing to the eye, and more alluring to the palate.

I give you no fancy sketches, all are from life ; even to the actions requiring my "DONT'S."

I have asked private nurses, What made you take up nursing ? and I give two replies :—(1) You are often thrown with very nice people and have such a good chance of

marrying. (2) The food is nearly always good, and you get drives and time for reading if you only take light cases. Now it is not to this class of person that I address myself (and here let me say that no woman with bad breath, a very heavy tread, or a confirmed habit of sniffing, should ever become a private nurse). I acknowledge patients are often most trying, in ways both great and small; illness seldom tends to extra amiability, but a nurse who has set her feet in the paths of nursing cannot expect to have the thorns and briars cleared away before her, any more than in any other path of life's duty. We approach perfection in nursing; the Gamp and the Betsy Prig are as extinct as the Dodo and Megatherium. But, alas! there still remain some nurses who make their unhappy patients feel, metaphorically, that which Dickens describes the latter lady as inflicting actually upon hers—*i.e.*, “that every button is wrenched into a wrong button-hole, the order of your boots reversed, and your hair combed comfortably into your eyes;” and there are still some curious nurses—specimens subjoined:—

The careless nurse, who comes in bonnet and cloak into her patient's room direct out of a public conveyance, in defiance of her hospital training and of all sanitary laws anent infection.

The greedy nurse, who is not satisfied with five meals a day, but helps herself when possible, or samples her patient's food.

The haughty nurse, who declines to take her own breakfast, etc., unless served with china cups and a silver spoon, and keeps her patient waiting in order to have it altered to her taste.

The untidy nurse, who never quite knows "where she put it down," and cheerfully keeps carbolic and lotions amongst your draughts and powders.

The lazy nurse, who reads novels, answers your fourth call with her finger in her book as a marker, and possibly suggests you could have done what you want yourself and not been such a baby!

The thoughtless nurse, who, placing before you a belated tray, cheerfully remarks "Well, I'm glad you've got it at all, with all that quarrelling downstairs."

The vain nurse, who surreptitiously conveys her patient's "pretties" into the dressing room and tries them on.

The dictatorial nurse, who robs you of all volition and, (as a poor creature once said to me,) comes to your bedside with a kindness in one hand and a sword in the other.

The talking nurse, who fills your brain with horrors owing to her mendacious histories of former "cases."

Enough of these. Lastly, who does not know and delight in the calm, capable, kind nurse, whose arrival brings comfort and courage to her patient, whose presence is a tower of strength, and whose departure is regretted by all? This is the class of nurse who raises the tone of nursing, of whom England is justly proud, and who is numbered amongst the friends of those who have had the happiness of being nursed by her.

And now for the "DON'TS" of private nursing.

If you have an operation case, DON'T make an exhibition of bandages, scissors and other necessities; conceal them near by, and keep everything unpleasant out of your patient's sight. Nervous patients' sufferings are aggravated by neglect of this.

DON'T forget to ask if your patient has false teeth, and to have them removed before anæsthetics are given.

DON'T do your patient's hair in a hard knob at the back, let it be plaited and hang at each side; this often prevents headaches.

DON'T omit to ascertain if your patient likes his or her head low or high, and is used to much or little bed-clothes. Attention to this will cause your patient to feel more natural when replaced in bed and sensible to surroundings.

DON'T have crackly skirts or squeaky shoes.

DON'T use scent on yourself; and if it is desired in the room, confine it strictly to Eau de Cologne, burning a little in an old saucer occasionally.

DON'T put the silk of the needles required by doctors in your mouth when threading them. I have known a doctor send a nurse straight off for this dangerous and insanitary act.

If your patient is sleepless, DON'T omit to try two quarts of dry fresh hops in a pillow case, placed under the patient's own pillow, very evenly spread. If derided as

“old-fashioned,” so long as it produces the required effect, what does it signify even if Noah used it to procure sleep when the Ark was buffeted by the waves?

In case of a leg injury, DON'T let your patient suffer whilst waiting for the cradle, To keep the bedclothes off, get a strong bandbox, knock the bottom out of it and cut it straight down the side. You can then slip the cardboard gently under the injured member, and protect it effectually till the proper appliances arrive. Two stiletto holes are advisable, as with tape you can draw the cardboard edges to overlap to any required size without moving the leg.

DON'T write on your slate where the patient can see and hear you ; make your observations quietly and unobtrusively.

DON'T strike matches at night. If the patient cannot bear a light, have a shaded night-light placed behind some screen or furniture. Many a patient has been roused by a match struck.

If you have but one room to nurse in and are obliged to warm utensils at the fire, DON'T omit to conceal their presence by a sheet or towel placed over them.

DON'T give details to the doctor in the patient's hearing.

DON'T whisper—under any circumstances.

DON'T forget to have all your coal done up in strong paper bags, your fire is then noiselessly made up ; and DON'T forget to have an old pair of gloves for fire use.

DON'T let a patient suffer from a glare, if no shades are provided. If gas globes, get a piece of brown paper and cut it rather wider than the globe and rather deeper; turn down a piece at the top. Take three strong pins, put them through, and crook them like a hook on to the gas globe. If an electric bulb has to be dealt with, cut a piece of brown paper in the same fashion, but under the turned down piece put a bit of strong cotton and tie round the bulb. In this way you can shade the patient's eyes effectually, and yet retain the light at the reverse side for your own use.

DON'T forget to have a piece of sheeting doubled, or flannel, along the washstand; it saves the clang of basins. If in a poor household, DON'T fuss, but take two or three ply of newspaper instead.

If asked to pull down a blind, look to see which *should* come down, but if told it is the wrong one, DON'T say, "Well, if you'd only *told* me which," etc., etc.

Obtain a small tray and place the toothbrush, powder or dentifrice, small basin, and tepid or cold water (as your patient desires) on it. DON'T go backwards and forwards for each small article.

DON'T mix your patient's washing sponge and face sponge, and DON'T hand the sponge or soap in your fingers to patients when able to wash themselves.

DON'T forget a blanket or a hot bottle, according to season, as after washing patient's feet, they sometimes become very cold.

In brushing hair, cover all the patient and her bed with a linen sheet. DON'T let one hair escape when removing it, and DON'T comb the brushes over the floor carpet; take them into another room with a cloth for the purpose.

DON'T neglect to have always three pillows; you require them to prop your patient up firmly for meals; and two should be always cooling to be fresh for the poor hot head.

DON'T be sparing with clean pillow cases and bed linen, but DON'T forget people have very different means, and DON'T expect to do in a poor man's house as you would in that of a rich one: be reasonable and considerate in all circumstances.

DON'T make "Nurse's daily walk" a terror and inconvenience to everyone: try and arrange it agreeably, and ask if there be any little thing you can do when out.

When your patients become convalescent, DON'T lose all interest in them; they are human beings as well as "Cases."

DON'T allow others to wash your feeding cup; and keep a length of soft linen to pass down the spout for thoroughly cleansing it (often neglected).

DON'T, on arrival, take the whole household into custody, so to speak, and try to make it "tremble at your frown." It will not do so, and you will have only yourself to thank for the ensuing disagreeableness and friction. Be as unobtrusive as possible; your department is strictly the sick-room.

In warm weather DON'T omit to place a deep basin on the floor (coolest place), fill it with cold water, and place in it all your lemonade, milk, barley water, etc., jugs, covering them with a damped cloth. Your patient will always have a cool refreshing drink instead of a tepid one.

If a patient has a tendency to sickness, or you have to give oil or nauseous medicine, DON'T forget to provide yourself with pieces of clean old linen. Place a piece under the patient's chin during either of these troubles, so as to prevent the smallest spot on night or bed clothes. Carefully wipe the patient's lips and corners of the mouth with the linen, which destroy at once. DON'T use pocket handkerchiefs for this purpose. Some patient's like the lips touched on these occasions with lemon, brandy or red lavender to destroy any after taste.

DON'T contradict or argue with a patient. Convalescents especially are apt to have what is called a "set back," if you do so.

If the patients express unreasonable wishes, DON'T curtly refuse, but say, "we will ask the Doctor," and mind you do so next visit, in the patient's presence and hearing. This engenders confidence in the nurse.

When the patient is very weak, changing and making the bed is a small trial, so DON'T bring in a pile of sheets, and putting it down with a heavy flop on the sofa, say with great severity, "I always get my bed made before—o'clock," but gently tell the sufferer how fresh and nice he will feel, and even if you then have grumbles you won't give irritation.

DON'T let milk stand any time in the same glass ; it and jelly especially, require a fresh, bright glass if presented a second time to a patient, also a fresh spoon. Food should be removed at once if not taken. DON'T forget a tightly fitting tin for biscuits, and keep it tight ; a neglect of this, for even a short time, will probably turn your patient against biscuits entirely.

If in a small household DON'T think it an indignity to wash a cup or spoon if it will give comfort to your patient by enabling her to have them always fresh and nice.

DON'T forget to have your own little kettle, spirit lamp and pan. Both in small houses, and in households of twenty servants, I have often known the gruel absolutely impossible, and the tea made with tepid water. You can be thus quite independent where these two matters are concerned. (The very best and most cultivated nurse I ever knew told me she considered them an indispensable part of a private nurse's equipment).

DON'T forget a little white kitchen paper. If grease floats on the patient's broth, pass a piece gently over the top of the liquid, and you will find it absorbs all the grease.

DON'T beat an egg *in* your patient's room, and DON'T forget to remove the little core most carefully.

If lemon is required, cut a round off and turn the cut part down against the plate ; in this way it is always fresh when you want another round for your patient's lips.

DON'T forget to have some whiskey occasionally in your sponging water. A disgrace indeed to a nurse is a bed sore ! Rubbing with whiskey or Eau de Cologne will warm obstinately cold feet, if the patient dislikes, as some do, hot bottles in bed.

DON'T omit to have a glass ready with tepid water and sanitas, into which dip every clinical thermometer before and after using. Let your patient *see* you do it—for obvious reasons.

DON'T put the bed jackets carelessly aside. Crumpled ribbons and crushed lace give your patient but a forlorn appearance, and DON'T forget a good large (white) shawl is indispensable when sitting up.

If illness has been prolonged, DON'T forget to place a soft pillow under the patient when sitting up ; at first the end bone of the spine is apt to feel tender.

DON'T cultivate a love for the succulent onion !

DON'T forget illness upsets the routine of a house, and make things as pleasant as you can for the household ; if you DON'T, your meals will very assuredly be anything but elaborate, and the attention you will receive, very limited.

When a patient is seriously ill, DON'T deceive the friends with a cheerful optimism, though you may speak hopefully if possible.

DON'T, on handing the letters to your convalescent, casually remark that you “suppose some one has taken the

big black-edged one away." (I have heard this and I never forgot it !)

DON'T give two courses of a meal on one tray. DON'T ask "what would you like to have?" let all meals be a kind of surprise. DON'T watch a patient eating; occupy yourself about the room or dressing-room, or sit with back to patient, nervous patients especially.

If the patient is well enough to see visitors, DON'T remain unless requested to do so. Ascertain everything is in order, place a bell within reach and retire.

DON'T put any lotion, sanitas, carbolic, etc., in the same part of the room where you have your medicine. If you have a second room always keep them there; the cleverest nurse may make a fatal mistake in a bottle.

DON'T imagine people are created in dozens of assorted sizes like gloves. No two persons are ever exactly similar. DON'T omit to observe your patients' peculiarities. And DON'T be slow to make allowances for differences of temperament. You cannot nurse all alike by hard and fast rules.

DON'T neglect to keep an ample supply of water in the washstand jugs, and DON'T on any account place food on the washstand, it is most unpleasant.

Notes on the case may be valuable, therefore DON'T use little bits of paper, but write your notes for the Doctor on a good sized sheet of paper.

Lastly, let me impress upon the nurse to consider her office as one of serious responsibility, not only as regards attention to her patient, but in that she often becomes, of necessity, aware of family secrets, and matters regarding the family or patient only. All this she should hold as sacred. Lawyers and doctors do not repeat confidences, neither should a nurse carry from house to house that which may have come to her knowledge in the exercise of her profession. A good nurse should keep her eyes open and her mouth shut.

As my earnest desire in printing this little address is to bring about more agreeable relations between patient and nurse in trifling matters, I cannot better terminate it than by some beautiful lines of Wordsworth :—

“ Small service is true service while it lasts
 Of humblest friend (Oh ! Patient !) scorn not one !
 The daisy, by the shadow that it casts,
 Protects the lingering dewdrop from the sun.”

E. F. Stewart Brown,
 Quarry Bank,
 Allerton,
 Liverpool.

